CÁLIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

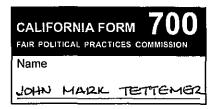
STATEMENT, OF ECONOMIC INTERESTS Y OF LAKE RORESTOND CITY CLERK'S OFFICE PRACTIC COVER PAGE N

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Please type or print in ink.	11 ACK - 1 AM 11:33	11 188 25 180 54
NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
TETTEM	ER JOHN	MARK
1. Office, Agency, or Court		
Agency Name		· · · · · · · · · · · · · · · · · · ·
Division, Board, Department, District, if applicable	Your Position	ity Council Membe
► If filing for multiple positions, list below or on an attact		
Agency: Orange County F	Tire Author Heposition: Ch	air Director
2. Jurisdiction of Office (Check at least one box	9	
☐ State	☐ Judge (Statewide Jui	risdiction)
Multi-County	County of	
Multi-County Make Forest	Other	
3. Type of Statement (Check at least one box)		
Annual: The period covered is January 1, 2010, the 2010.	rough December 31, Leaving Office: Da (Check one).	ate Left/
The period covered is/, three 2010.	rough December 31, O The period cove leaving office.	red is January 1, 2010, through the date of
Assuming Office: Date	 The period cove of leaving office. 	ered is, through the date
Candidate: Election Year	Office sought, if different than Part 1:	
4. Schedule Summary		
Check applicable schedules or "None."	► Total number of pages inclu	ding this cover page:
Schedule A-1 - Investments – schedule attached	Schedule C - Income, Lo.	ans, & Business Positions - schedule attached
Schedule A-2 - Investments - schedule attached	Schedule D - Income – G	
Schedule B - Real Property - schedule attached	Schedule E - Income - G	Sifts - Travel Payments - schedule attached
□ Mana	-or-	
I have used all reasonable diligence in preparing this state herein and in any attached schedules is true and comple		
I certify under penalty of perjury under the laws of th	ne State of California that	
Date Signed 3 25 20 11 (month, day, year)	Signature	

SCHEDULE D Income - Gifts



· · · · · · · · · · · · · · · · · · ·		
► NAME OF SOURCE	NAME OF SOURCE	
KENNEDY JENKS CONSULTANTS		
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	
` <u>-</u>		
100 FOURTH STREET, SANTA ROSA,	BUSINESS ACTIVITY, IF ANY, OF SOURCE	
BUSINESS ACTIVITY, IF ANY, OF SOURCE CA, 95401	BUSINESS ACTIVITY, IF ARTY, OF SOURCE	
ENGINEERING CONSULTANTS		
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	
2 6 1-0-1-		
3,8,10,100 DINNER	\$	
	\$	
<u></u>		
NAME OF COURSE	Name of college	
NAME OF SOURCE	NAME OF SOURCE	
BEST BEST & KIZIEGEIL		
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	
5 PARK PLAZA, IRVINE, CA, 92614		
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	
LAW FIRM		
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	
]	
6,4,10,250 GOLF/LUNCHEON		
NAME OF SOURCE	NAME OF SOURCE	
WASTE MANAGEMENT OF O.C.		
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	
1900 & GOAND ALL CANTA AND CA		
1800 S. GRAND AVE, SANTA ANA, CA, BUSINESS ACTIVITY, IF ANY, OF SOURCE 9770C	BUSINESS ACTIVITY, IFANY, OF SOURCE	
1,21,00	Sources vie i vivil i vivil e vivil	
WASTE HAULER	DESCRIPTION OF OUT (S)	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	
9,16,10 ,100 DINNER		
-1/14/10 \$100 DININGE		
\$		
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Comments:		